



APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For

Date of Application

How Did You Learn About Us? Please Circle

Advertisement Friend Walk-In Employment Agency Relative Other_____

Email address: _____

Last Name		First Name		Middle Name	
Address	Number	Street	City	State	Zip Code
Telephone Number(s)			Social Security Number		

If you are under 18 years of age, can you provide required proof of your eligibility to work?

Yes or No

Have you ever filled out an application with us before?

Yes or No

If Yes, give date

Have you ever been employed with us before?

Yes or No

If Yes, give date

Are you currently employed?

Yes or No

May we contact your present employer?

Yes or No

Do you have your commercial driver's license (CDL)?

Yes or No



Are you prevented from lawfully becoming employed in this country, because of Visa or Immigration Status?

Proof of citizenship or immigration status will be required upon employment.

Yes or No

On what date would you be available for work?

Are you available to work (Please circle all that apply) F/T P/T Shift Work Temporary

Are you currently on “lay-off” status and subject to recall?

Yes or No

Can you travel if a job requires it?

Yes or No

Have you ever been convicted of a felony?

Yes or No

If Yes, please explain _____

Education

High School Name and Location

Years Completed/Diploma/GED _____

Undergraduate College/University Name and Location _____

Describe Course of Study _____

Years Completed/Diploma _____

Graduate/Professional Name and Location _____

Describe Course of Study _____

Years Completed/Diploma _____

List any special training, skills, apprenticeship, and extra-curricular activities _____



Please indicate any foreign languages you can speak, read and/or write

	Fluent	Good	Fair
SPEAK			
READ			
WRITE			

List professional, trade, business or civic activities and offices held.

You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:

References

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1.

2.

3.

Have you ever had a job-related training in the United States military?

Yes or No

If Yes, please describe

Are you physically or otherwise unable to perform the duties of the job for which you are applying?

Yes or No



Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status. Please attach additional sheets if needed.

1. Employer _____

Address _____

Telephone Number _____

Hourly Rate/ Salary Starting _____ Final _____

Job Title _____ Supervisor _____

Worked Performed _____

Dates Employed From _____ To _____

Reason for Leaving _____

2. Employer _____

Address _____

Telephone Number _____

Hourly Rate/ Salary Starting _____ Final _____

Job Title _____ Supervisor _____

Worked Performed _____

Dates Employed From _____ To _____

Reason for Leaving _____



Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "*at will*" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "*at will*" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by the rules and regulations of the employer.

Signature of Applicant _____ Date _____

For Personnel Department Use Only

Arrange Interview Yes or No

Remarks _____

Interviewer _____ Date _____

Employed Yes or No Date of Employment _____

Job Title _____ Hourly Rate/Salary _____ Dept. _____

By _____ Date _____
Name and Title

NOTES _____

